

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

2008 OCT 17 AM 11:30

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Deb Ballalatak

Political Party (if applicable)

Dem.

Office Sought

IOWA Senate

District (if Senate or House)

36

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1819
Logged In	S
Scanned	
Computer	
Audited	17 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Deb Ballalatak
SIGNATURE OF PERSON FILING REPORT

641-932-2933
TELEPHONE

10-17-08
DATE SIGNED

I AM FILING A

10/19/08

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

4735.00

Schedule F: Loans Received total (Attach Schedule F)

100.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

4835.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

3755.66

Schedule F: Loan Repayments total (Attach Schedule F)

100.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

979.34

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

0

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

1493.86

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
8-12-08	Phyllis Week 1475 175th PL Knoxville IA 50138		envelopes labels	\$ 18.00	<input type="checkbox"/>
8-06-08	Deb BALLALATAK 1522 618th PI ALBIA, IA 52531	Self	Business Card stc	12.88	<input type="checkbox"/>
8-06-08	Deb Ballalatak 1522 618th PI ALBIA, IA 52531	Self	printer ink Color BLACK	39.97 35.00	<input type="checkbox"/>
8-28-08	Deb Ballalatak 1522 618th PI ALBIA, IA 52531	Self	campaign fax signed pen order	\$3.	<input type="checkbox"/>
9-9-08	Deb Ballalatak 1522 618th PI ALBIA, IA 52531	Self	Bl. inkjet Color inkjet RM. paper	\$83.72	<input type="checkbox"/>
9-6-08	Deb BALLALATAK	Self	labels	\$16.84	<input type="checkbox"/>
9-9-08	Deb Ballalatak	Self	matte cowboy card paper	\$21.07	<input type="checkbox"/>
9-11-08	RAY Vitko 113 Benton Ave W ALBIA, IA 52531	Brother	business cards	\$6.66	<input type="checkbox"/>
9-16-08	Mahaska County Auditor Deb Ballalatak OSkalooSA IA	Self	mahaska Co plate bk	\$24.00	<input type="checkbox"/>
9-27-08	Deb Ballalatak 1522	Self	postage Resend Cards	\$1.04	<input type="checkbox"/>

SUB-TOTAL

\$262.18

TOTAL (if last
page of this
schedule)

\$

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 5
(for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
--------------------------------------	--------------------------

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-10-08	Jim Deb Ballalatak 1522 618th Pl Albion, LA	husband	business cards	\$ 6.39	<input type="checkbox"/>
10-7-08	JIM Ballalatak 1522 618th Pl Albion, LA 52531	husband	printer ink	\$ 49.79	<input type="checkbox"/>
10-14-08	JIM Ballalatak 1522 618th Pl Albion, LA 52531	husband	Printer ink	\$ 21.34	<input type="checkbox"/>
8-5-08	JIM Ballalatak	" "	gas	\$ 30	<input type="checkbox"/>
8-6-08	" "	" "	gas	\$ 45.70	<input type="checkbox"/>
8-7-08	" "	" "	" "	\$ 49.01	<input type="checkbox"/>
8-8-08	" "	" "	gas	\$ 52.85	<input type="checkbox"/>
8-12-08	" "	" "	gas	\$ 20.06	<input type="checkbox"/>
8-13-08	" "	" "	" "	\$ 51.50	<input type="checkbox"/>
8-19-08	" "	" "	" "	\$ 55	<input type="checkbox"/>

SUB-TOTAL \$ 381.58

TOTAL (if last
page of this
schedule)

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 5
(for Schedule E)

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
8-22-08	Jim Ballalatak 1522 618th PL ALBANY (A-5253)	husband	GAS	\$ 40.	<input type="checkbox"/>
8-25-08	" "	"	GAS	\$ 41.	<input type="checkbox"/>
8-31-08	" "	"	GAS	\$ 43.	<input type="checkbox"/>
9-2-08	" "	"	GAS	\$ 37.	<input type="checkbox"/>
9-6-08	" "	"	"	\$ 39.	<input type="checkbox"/>
9-5-08	" "	"	gas	\$ 54.70	<input type="checkbox"/>
9-9-08	" "	"	gas	\$ 52.40	<input type="checkbox"/>
9-12-08	" "	"	"	\$ 56.	<input type="checkbox"/>
9-15-08	" "	"	"	\$ 20.	<input type="checkbox"/>
9-16-08	" "	"	"	\$ 43.59	<input type="checkbox"/>

SUB-TOTAL

\$ 426.69

TOTAL (if last
page of this
schedule)

\$

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 5
(for Schedule E)

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
--------------------------------------	--------------------------

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

Reset Form

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
9-20-08	JIM Ballalatak 1522 618th PL Albion, LA 52531	husband	gas	\$ 36.46	<input type="checkbox"/>
9-22-08	" "	"	gas	48.50	<input type="checkbox"/>
9-23-08	" "	"	gas	\$ 48.	<input type="checkbox"/>
9-26-08	" "	"	gas	\$ 34.84	<input type="checkbox"/>
9-29-08	" "	"	gas	\$ 49.40	<input type="checkbox"/>
9-30-08	" "	"	gas	\$ 35.01	<input type="checkbox"/>
10-5-08	" "	"	"	\$ 37.	<input type="checkbox"/>
10-7-08	" "	"	"	\$ 43.	<input type="checkbox"/>
10-9-08	" "	"	"	\$ 26.25	<input type="checkbox"/>
10-10-08	" "	"	GAS	\$ 40.01	<input type="checkbox"/>

SUB-TOTAL

\$ 398.41

TOTAL (if last
page of this
schedule)

\$

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 5
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BAILLATAK

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-14-08	VIM BAILLATAK 1522 618th Pl Albia, IA 52531	husband	gas	\$ 25.	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$ 25

TOTAL (if last
page of this
schedule)

\$ 1493.86

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 5 of 5
(for Schedule E)

pg 1

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
08-06-08	ID# 566 CK# 1017	LABOES LOCAL union 566 1805 E. Mary St. Suite A OTTUMWA, IA 52501	-	\$500.	<input type="checkbox"/>
08-06-08	ID# - CK# 1003	Phyllis Weeks 1475 175th PL. Knoxville, IA. 50138	-	\$25.	<input type="checkbox"/>
08-06-08	ID# - CK# CASH	Kathy Meador 813 W. Madison Knoxville, IA 50138	-	\$20.	<input type="checkbox"/>
8-15-08	ID# - CK# 6437	Lorraine Carr 116 WASH. AVE. E ALBIA, IOWA 52531	-	\$25.	<input type="checkbox"/>
8-17-08	ID# - CK# 3494	Dean Ballalatak Trucking 2005 Noet Ave Lovilia, IA 50150	1st Cousin by Marriage	\$100.	<input type="checkbox"/>
8-19-08	ID# - CK# 1267	Catherine Hinga Haustein 1214 Main St Pella IA 50219	-	\$20.	<input type="checkbox"/>
8-19-08	ID# - CK# 3949	Kathryn Ballalatak 104 West third Lovilia, IA 50150	Aunt by Marriage	\$20.	<input type="checkbox"/>
8-19-08	ID# - CK# 9597	Thomas & Nancy VanZee 2315 Lucas Dr. Pella, IA 50219	-	\$25	<input type="checkbox"/>
8-20-08	ID# - CK# 4906	Eor M Kraber 1101 7th St West Des Moines, IA 50265	Cousin by marriage	\$50.	<input type="checkbox"/>
8-20-08	ID# - CK# 2892	Larry Bled Soc 1475 175th Pl Knoxville, IA 50138	-	\$20	<input type="checkbox"/>
SUB-TOTAL				\$805.	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

pg 2

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A
(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8-21-08	ID# - CK# 1004	Leroy Winfield II 116 Benton Ave W ALBIA IA 52531	Family friend	\$ 20.	<input type="checkbox"/>
8-21-08	ID# - CK# 3359	EDWIN SIMPSON JR Box 35 ALBIA. IA 52531	Family friend	\$ 100.	<input type="checkbox"/>
8-21-08	ID# - CK# 8133	Cynthia Rockwell 123 South 5th St ALBIA IA 52531	Cousin by marriage	\$ 20.	<input type="checkbox"/>
8-22-08	ID# - CK# 745	George Teno Jr Hwy 137 1398 ALBIA. IA 52531	Family friend	\$ 25.	<input type="checkbox"/>
8-22-08	ID# - CK# 2891	Sue Ammons 2257 - 623rd Ave ALBIA. IA 52531	Family friend	\$ 30.	<input type="checkbox"/>
8-22-08	ID# - CK# 5399	Helen Teno 1265 670th Ave. Eddyville. IA 52553	Family friend	\$ 25.	<input type="checkbox"/>
8-26-08	ID# - CK# 1243	Jim Ahn 521 South 11th St ALBIA. IA 52531	Family friend	\$ 20.	<input type="checkbox"/>
8-26-08	ID# - CK# 1038	MARION County Democratic Cent. Committee Knoxville. IA 50138		\$ 250.	<input type="checkbox"/>
8-26-08	ID# - CK# 3985	Sandy Vitko 316 A Ave E ALBIA. IA 52531	by marriage AUNT	\$ 30.	<input type="checkbox"/>
8-26-08	ID# - CK# 3820	Ted + Caroline Eller 1406 W. Grandview Dr. Knoxville. IA 50138		\$ 20.	<input type="checkbox"/>

SUB-TOTAL

\$ 540

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 7
(for Schedule A)

3

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8-28-08	ID# - CK# 13887	Phil + Jan Stalzer 704 B Ave E ALBIA, IA 52531	Friend	\$ 25.	<input type="checkbox"/>
8-28-08	ID# - CK# 9658	Linda R. Casey 1101 7th St. West Des Moines, IA 50265	Family By Marriage	\$ 25.	<input type="checkbox"/>
8-28-08	ID# - CK# 1008	Cinda + Dennis Comstock 2259 653rd Ave ALBIA, IA 52531	Friend	\$ 20.	<input type="checkbox"/>
8-28-08	ID# - CK# 2614	Larry + Joyce Ballalatak 1603 Norris Place Marshalltown, IA 50158	Cousin By Marriage	\$ 20.	<input type="checkbox"/>
8-28-08	ID# - CK# 10169	John + Lois Knowles 503 A Ave West ALBIA, IA 52531	Family Friend	\$ 20.	<input type="checkbox"/>
8-29-08	ID# - CK# 5886	Carol Gardner 204 S. 13th St. Albia, IA 52531	Family Friend	\$ 20.	<input type="checkbox"/>
8-29-08	ID# - CK# 9158	Larry + Donna Hindman 1697 640th Ave Albia, IA 52531	Family Friend	\$ 100.	<input type="checkbox"/>
8-29-08	ID# - CK# 4188	Dawn + Kenneth Neff 1103 Carpenter St. Monroe, IA 50170		\$ 20.	<input type="checkbox"/>
8-30-08	ID# - CK# 6573	Dan + Julie Stocker 1793 Hwy 137 Albia, IA 52531	Family Friend	\$ 25.	<input type="checkbox"/>
8-30-08	ID# - CK# 1057	Larry + Suzanne Roberts 309 N 5th St ALBIA, IA 52531	Family Friend	\$ 50.	<input type="checkbox"/>
SUB-TOTAL				\$ 325.	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 7
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8-30-08	ID# - CK# 1763	Lea - Tim Weldon 2407 Princeton Road LOWACITY, IA 52245	Aunt UNCLE	\$ 100.	<input type="checkbox"/>
9-2-08	ID# - CK# 5959	Lloyd + Lois (Dennis) McDowell 11655 172nd Ave MORAVIA, IA 52571	Family Friend	\$ 40.	<input type="checkbox"/>
9-3-08	ID# - CK# 8451	Kevin - Cynthia Halbmaier Box 205 ALBIA, IA 52531	Family Friend	\$ 25.	<input type="checkbox"/>
9-3-08	ID# - CK# 2895	Ruth Ann Vitko 223 Marianna Ave OTTUMWA, IA 52501	Aunt by marriage	\$ 20.	<input type="checkbox"/>
9-3-08	ID# - CK# 8696	Ernest Montgomery 607 B Ave E ALBIA, IA 52531	Family Friend	\$ 25.	<input type="checkbox"/>
9-3-08	ID# - CK# 4490	Roger Shinn Box 286 Knoxville, IA 50138	Family Friend	\$ 350.	<input type="checkbox"/>
9-4-08	ID# - CK# 8485	Jerry + Karen Fontinel 22 G. Ave. W. ALBIA, IA 52531	Family Friend	\$ 25.	<input type="checkbox"/>
9-4-08	ID# - CK# 11417	Cecil + Sandra Showers 1385 534th LN. LOVILIA, IA 50150	Cousins by marriage	\$ 20.	<input type="checkbox"/>
9-5-08	ID# - CK# CASH	JANE VITKO 12th Ave East ALBIA, IA 52531	Mother	\$ 20.	<input type="checkbox"/>
9-9-08	ID# - CK# 5409	DENNIS - Carolyn Ryan 5549 - 275th St. Melrose, IA 52569	family friend	\$ 20.	<input type="checkbox"/>

SUB-TOTAL

\$ 645

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 4 of 7
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YYR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-11-08	ID# - CK# 704	Ralph + Kay Wilson Jr. 2899 Hwy 16 West Point, IA 52656	Family Friend	\$ 20.	<input type="checkbox"/>
9-12-08	ID# - CK# 9190	Heather Hindman 1648 640th Ave Albia, IA 52531	Inlaw ndce	\$ 25.	<input type="checkbox"/>
9-13-08	ID# - CK# CASH	BOB REED Box 695 ALBIA IA 52531	FAMILY Friend	\$ 40.	<input type="checkbox"/>
9-13-08	ID# - CK# 5814	Connie + Joe Sinnott 5623 Hwy 34 Melrose, IA 52569	Family Friend	\$ 30.	<input type="checkbox"/>
9-15-08	ID# - CK# 2544	Deb Zaputis 6200 204th Rd ALBIA, IA 52531	family friend	\$ 20.	<input type="checkbox"/>
9-15-08	ID# - CK# 7363	Diana Sullivan 312 South 13th ALBIA, IA 52531	friend	\$ 20.	<input type="checkbox"/>
9-17-08	ID# 6110 CK# 001033	Southern IA Labor Council 116 North green Street Ottumwa, IA 52501		\$ 100.	<input type="checkbox"/>
9-19-08	ID# - CK# 7145	Lynne O'Sing - Doug- 22438 87th St. Blakesburg, IA 52536	friend	\$ 25.	<input type="checkbox"/>
9-19-08	ID# - CK# 2527	Cleo + Delbert Love 1543 625th LN Albia, IA 52531	friend neighbor	\$ 50.	<input type="checkbox"/>
9-20-08	ID# - CK# CASH	MIKE SINNOTT 5623 Hwy 34 W. Melrose, IA 52569	family Friend	\$ 20	<input type="checkbox"/>

SUB-TOTAL

\$ 350

TOTAL (If last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 5 of 7
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9-20-08	ID# - CK# 6951	Marylou Rinehart 205 S. Clinton Apt 5 Albia, IA 52531	Friend	\$ 25.	<input type="checkbox"/>
9-22-08	ID# - CK# 3375	RON + DIANA DUNHAM 121 SW Scott St Ankeny, IA 50023	Biological Father	\$ 25.	<input type="checkbox"/>
9-25-08	ID# - CK# 604	Monroe Co Democratic Central Committee ALBIA, IA 52531	-	\$ 75.	<input type="checkbox"/>
9-26-08	ID# - CK# 3051	Raymond - Robin Martin 1224 Big Rock Park Rd Pella, IA 50219-1088	-	\$ 50.	<input type="checkbox"/>
9-27-08	ID# - CK# 1044	MAISON County Democratic Central Committee Knoxville, IA 50138	-	\$ 40.	<input type="checkbox"/>
9-27-08	ID# - CK# CAS 4	Dave + Kathy Tjernagel 301 S. Conrey Knoxville, IA 50138	Family Friend	\$ 50.	<input type="checkbox"/>
9-30-08	ID# - CK# CAS 4	PAT + Maryann Crall 6119 188th +el Albia, IA 52531	Family friend	\$ 20.	<input type="checkbox"/>
10-2-08	ID# - CK# 1589	Joe + Allison Paulk Judge 7312-189th St ALBIA IA 52531	Family friend	\$ 100.	<input type="checkbox"/>
10-4-08	ID# 8038 CK# 00376744	United Food + Commercial Workers International Union, CLC 1775 K Street, N.W., Washington D.C. 20006 1598		\$ 1000.	<input type="checkbox"/>
10-6-08	ID# 6439 CK# 2039	CWA COUNCIL of State of IOWA Cope Fund 369 California St. Waterloo, IA 50703		\$ 200.	<input type="checkbox"/>

SUB-TOTAL

\$1585.

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 6 of 7
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-6-08	ID# 6060 CK# 2605	IOWA Federation of Labrr, AFL-CIO 2000 Walker St. Suite A Des Moines, IA 50317		\$ 400.	<input type="checkbox"/>
10-6-08	ID# CK# CASH	Baeb SAUTO 415 S. Main ALBIA, IA. 52531	family friend	\$10.	<input type="checkbox"/>
10-7-08	ID# - CK# 6162	Carl + Jackie Keeton 322 S. DAVIS St OTTUMWA - IA 52501	Family friend	\$25.	<input type="checkbox"/>
10-8-08	ID# - CK# 10539	MARY BAUX 1734 Hwy 6-76 RUSSEY, IA 50044		\$30	<input type="checkbox"/>
9-16-08	ID# - CK# 8027	Steve + Linda Hoskins 1110 4th Ave ALBIA, IA 52531	family friend	\$20.	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$485
\$4435

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 7 of 7
(for Schedule A)

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Team Ballalatak

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08-12-08	ID# 1819 CK# 8001	JIM BALLALATAK <i>Sm's</i> 1522 618th PI ALBIA, IA 52531	pay 4 envelopes \$10.550 pcs	\$ 6.91
08-12-08	ID# 1819 CK# 8002	JIM Ballalatak <i>Sm's</i> 1522 618th PI ALBIA, IA 52531	pay 4 175 sheets Business cards	\$5.75
08-12-08	ID# 1819 CK# 8003	Jim Ballalatak <i>Walmart</i> 1522 618th PI ALBIA, IA 52531	pay 4 sm. envelopes Labels 750	\$ 6.47
8-13-08	ID# 1819 CK# 8004	Marion Co. Postmaster Knoxville, IA 50138	500 Stamps	\$210.
8-26-08	ID# 1819 CK# 8005	Madroc Co. Postmaster ALBIA, IA 52531	100 STAMPS	\$ 42.
8-28-08	ID# 1819 CK# 8006	CAPITOL PROMOTIONS Box 231 249 N. Keswick Ave Glenside, PA 19038	100 yards signs 500 pens	\$ 506.80
9-5-08	ID# 1819 CK# 8007	Sec of State of IOWA Lucas Bldg. 1st Floor Des Moines, IA 50319	District 36 Voter list	\$10.
9-15-08	ID# 1819 CK# 8009	Mon. Co. Postmaster ALBIA, IA 52531	100 Stamps	\$42.
SUB-TOTAL				\$829.93
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

☒ Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9-15-08	ID# 1819 CK# 8010	Knoxville Canvas Box 167 Knoxville, IA 50138	4 vinyl signage plain 3'x5' hem + gromet	\$64.20
9-15-08	ID# 1819 CK# 8011	Marion Co Auditor Knoxville, IA 50138	Marion Co plat BK	\$15.00
9-19-08	ID# 1819 CK# 8012	CHAMPION Storage + Signs South 7th St Oskaloosa, IA 52577	vinyl lettering for 4 vinyl signs	\$224.70
9-19-08	ID# 1819 CK# 8013	CARTER Printing 1739 E Grand Ave Des Moines IA 50316	1000 Campaign cards 2000 Postcards	\$402.80
9-20-08	ID# 1819 CK# 8014	JIM Ballalatak 1522 618th Pl Albia IA 52531	2000 Labels	\$16.83
9-20-08	ID# 1819 CK# 8015	Monroe County Postmaster Benton Ave West ALBIA, IA 52531	800 stamps	\$216.
9-22-08	ID# 1819 CK# 8016	Capitol Promotion Box 231 Glenside, PA 19038	100 yard signs	\$282.
9-22-08	ID# 1819 CK# 8017	Secretary State of IA Lucas Bldg Des Moines, IA 50319	absentee ballot request list	\$23.20
SUB-TOTAL				\$1244.73
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9-23-08	ID# 1819 CK# 8018	Monroe County Postmaster ALBIA. IA 52531	1200 Postcard Stamps	\$ 324.
10-2-08	ID# 1819 CK# 8019	Champion Signs 1203 So. 7th St OSKaloosa, IA 52577	reword pink signs to say "Iowa Senate" Not Supervisor	\$ 107.
10-7-08	ID# 1819 CK# 8020	Postmaster, Monroe County ALBIA. IA 52531	100 Stamps	\$ 42.
10-13-08	ID# 1819 CK# 8021	Knoxville Journal Express Knoxville, IA 50138	4 Papers - 2 wks Adds Knox reminder - off Shipper Pilechronicle Knox journal express 21-22-23-24-28-29-30-31	\$ 675.
10-14-08	ID# 1819 CK# 8022	ALBIA Newspapers 109-111 Benton Ave E ALBIA, IA 52531	Albia paper 3 wks Chariton paper 3 wks	\$ 390.50
10-14-08	ID# 1819 CK# 8023	The Exchange 113 1st Ave Winterset IA	political add 2 wks	\$ 142.50
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$1681.
TOTAL (If last page of this schedule) \$3755.66

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)



SCHEDULE

F

(Rev. 02/08)

LOANS
RECEIVED
& REPAYED
☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

TEAM BALLALATAK

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ _____**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
8-4-08	Deb Ballalatak 1522 618th PI ALBIA, IA 52531	Self	\$ 100.

TOTAL (PART I)

\$ 100.

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
8-11-08	Deb Ballalatak 1522 618th PI Albia, IA 52531	Self	\$ 100.

TOTAL CASH REPAYMENTS (PART II)

\$ 100.

From Schedule E - TOTAL LOANS FORGIVEN

\$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 0

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page 1 of 1
(for Schedule F)